

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-28112005 DEC 15 AM 8:26
FILED
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TALLAHASSEE, FLORIDARECEIVED
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

HEWES HANDYMAN SERVICE, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED
LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

HEWES HANDYMAN SERVICE, LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

1123 BYXBEE CT
NORTH PORT FL 34288-8702

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT SIGNATURE**

The name and the Florida street address of the registered agent is:

MICHAEL F. HEWES SR.
1123 BYXBEE CT
NORTH PORT FL 34288-8702

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



MICHAEL F. HEWES SR./ Registered Agent's Signature

ARTICLE IV MANAGEMENT

The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

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ARTICLE V

The name(s) and address(es) of the managing members of the LLC are:

MANAGING MEMBER: MICHAEL F. HEWES SR.
1123 BYXBEE CT
NORTH PORT FL 34288-8702



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MICHAEL F. HEWES SR.
Typed or printed name of signee

2005 DEC 15 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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